

242 (60)

PART B—ISSUE FEE TRANSMITTAL

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1. CORRESPONDENCE ADDRESS

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2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME

Street Address

City, State and ZIP Code

CO-INVENTOR'S NAME

Street Address

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Check if additional changes are enclosed

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08743905	11/04/96	019	THOMAS, A	1315 11/25/97
First Name	TRACTY			
Applicant	PETER			

TITLE OF INVENTION PERFORATED STOCK FOR LABELING CD-ROM JEWEL CASE

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
1 MUF-203	428-043.000	U61	UTILITY	YES	\$660.00	02/25/98

3. Correspondence address change (Complete only if there is a change)

03/09/1998 RJOHNSON 00000209 08743905
01 FC:242 660.00 0P

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1 Milde, Hoffberg & Macklin, LLP

2 _____

3 _____

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE:

(2) ADDRESS: (CITY & STATE OR COUNTRY)

6a. The following fees are enclosed:

Issue Fee Advance Order - # of Copies _____

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Any Deficiencies in Enclosed Fees _____

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Authorized Signature)

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2/25/98

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on: **February 25, 1998** (Date)

Margaret Peloso (Name of person making deposit)

Margaret Peloso (Signature)

2/25/98 (Date)

1. TRANSMIT THIS FORM WITH FEE